



NEW LICENSE APPLICATION

**FORM MUST BE FILLED OUT COMPLETELY
PLEASE PRINT CLEARLY**

Type of License - Please check all appropriate box(es):

Common Victualler (Food) ☐
Pub/Farmer Brewery ☐
Class I ☐ *Class II* ☐ *Class III* *Commercial Garage* ☐

Name of Business as it will appear on your license:

_____ **DBA** _____

Address of Business: _____ **Parcel ID Map** ____ **Lot** ____

Telephone Number of Business: _____

Owner ☐ **Renter** ☐ **If you do not own the property where the business will be operated please complete the Landlord information.**

Landlord's Name: _____ **Cell:** _____ **Address:** _____

Contact Information:

Owner/Manager (s) Name: _____

Home Address: _____

E-Mail Address: _____

Cell Number: _____ **Home Number:** _____

Owner/Manager Signature

Date